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COMMITTEE ON THE RIGHTS OF THE CHILD

CONSIDERATION OF REPORTS SUBMITTED BY STATES PARTIES
UNDER ARTICLE 44 OF THE CONVENTION

Initial reports of States parties due in 1992

Addendum

MALI

[2 April 1997]

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INTRODUCTION

1. The Government of Mali, which is aware of the universal and dynamic importance of the Convention on the Rights of the Child, has made the ongoing and gradual implementation of the Convention the focus of its national concerns. As a genuine international instrument for guaranteeing the happiness of children, the Convention is the answer to our country's many problems. Mali is thus involved in all activities and actions designed to achieve the Convention's objectives. It ratified the Convention early on, shared the chairmanship of the World Summit for Children held in New York on 29 and 30 September 1990 and has formulated its National Plan of Action (NPA). It has also taken part in several summit and other meetings designed to promote the rights of the child. For example, the International Conference on Population and Development drew the attention of the international community to the elimination of all forms of discrimination, specifically against boys, girls and adolescents.

2. Activities of various kinds in the social, health, nutrition and education sectors, as well as activities designed to protect freedom, are being carried out with a view to the gradual implementation of the Convention. The present report describes the situation of the rights of the child in Mali in accordance with article 44 of the Convention, which requires States to submit a report to the Committee on the Rights of the Child, through the Secretary-General of the United Nations, to evaluate the implementation of the Convention and the progress made on the enjoyment of the rights of the child.

3. The general structure of Mali's initial report basically follows the general guidelines regarding the form and content of initial reports, dated 30 October 1991 (CRC/C/5). The first two chapters deal with general measures of implementation and information and publicity on the rights of the child. The articles of the Convention are then listed under the following seven main headings: definition of the child; general principles; civil rights and freedoms; family environment and alternative care; basic health and welfare; education and leisure; and special protection measures.

I. GENERAL MEASURES OF IMPLEMENTATION

A. Measures taken to harmonize national law and policy with the provisions of the Convention

4. Mali has always expressed its political will to promote the rights of the child and guarantee children attentive care and protection. This determination and this commitment to the development of the child have been demonstrated regularly. Mali shared the chairmanship of the World Summit for Children held in New York on 29 and 30 September 1990 and ratified the Convention on the Rights of the Child by means of Act No. 90-72/ANRM of 29 August 1990. This speedy ratification of the Convention did not create any real problem of lack of harmonization between the Convention and the national legal system and the administrative measures in force in the country.

5. A detailed study on the harmonization of national law with the Convention showed that Mali's legislation is basically in keeping with the spirit of the Convention. The following texts contain provisions relating to the advancement and protection of children:

Act No. 62-17/ANRM of 3 February 1962 containing the Marriage and Guardianship Code;

Order No. 36/CMLN of 31 July 1973 containing the Family Relations Code;

Act No. 62-18/ANRM of 3 February 1962 containing the Nationality Code and amendments thereto;

Act No. 99/ANRM of 3 August 1961 containing the Penal Code;

Act No. 88-35/ANRM amending Act No. 62/ANRM of 9 August 1962 containing the Labour Code;

Decree No. 98/PGRM of 18 October 1975 determining the types of jobs and categories of companies in which work by young people is prohibited and the age limit to which the prohibition applies;

Act No. 62-68/ANRM of 9 August 1962 containing the Social Welfare Code;

Decree No. 145/PGRM of 24 June 1984 on the organization and operation of the Bollé Observation Centre.

Act No. 87-98/ANRM of 9 February 1987 on the criminal responsibility of minors and on the establishment of juvenile courts;

Order No. 90-37/PRM establishing the Reception and Family Placement Centre;

Decree No. 314/PGRM of 26 November 1981 governing the obligation to attend school and repealing Decree No. 10/PGRM of 4 February 1964;

Act No. 87-27/ANRM governing civil status.

6. These texts and other equally important provisions serve as the legal framework for children in Mali. The results of the study on the harmonization of national law with the provisions of the Convention on the Rights of the Child were discussed at a national workshop (14-15 June 1993) attended by representatives of ministerial departments, non-governmental organizations, associations and civil society. The workshop strongly reaffirmed the idea of formulating a "code on the well-being and protection of children" based on the study on the harmonization of internal law with the Convention and urged that an independent national committee should be set up, composed of persons of high moral standing whose mandate would be to monitor the implementation of the Convention and encourage all parties to strengthen the protection and advancement of children.

7. At present, the Ministry of Justice is in the process of considering Act No. 87-98/ANRM of 9 February 1987 on the criminal responsibility of minors

and the establishment of juvenile courts on second reading with a view to improving the protection of children. The idea of strengthening rehabilitation and reintegration as substitutes for the punishment and imprisonment of minors underlies the new reform, which also involves the far-reaching reorganization of child welfare agencies.

8. A commission composed of experts (legal, social, health care, etc.) has been set up to draft the National Code on the Well-Being and Protection of Children in accordance with the recommendations of the study on the harmonization and the national workshop. The work on the draft Code has been finalized. The Code covers all aspects of the Convention on the Rights of the Child in a single and diversified "national instrument" whose main thrust is the constant improvement of the health and education of children, guarantees of their civil, economic, social and cultural rights and the improvement of their protection.

B. Existing or planned mechanisms at the national or local level for coordinating policies relating to children and for monitoring the implementation of the Convention

Inter-Ministerial Commission for the Implementation of the National Plan of Action on the Survival, Development and Protection of Children of Children (1992-2000)

9. Mali drafted its National Plan of Action (NPA) early on and a high level structure was set up by Decree No. 94-209/PRM of 7 June 1994 to implement it. The Decree establishes an inter-ministerial commission which reports to the Minister of Health, Solidarity and Elderly Persons. The commission has the following specific functions:

To promote and coordinate effective action to monitor the implementation of activities under the Plan of Action;

To consider progress reports on the various sections of the Plan of Action;

To promote cooperation between donors and the competent technical departments;

To prepare annual reviews for international meetings;

To take part in international meetings on the problems of children.

10. The commission is composed as follows:

Chairman: The Minister of Health, Solidarity and Elderly Persons

Members:

The Minister of Basic Education or his representative

The Minister of Youth Affairs or his representative

The Minister of Finance or his representative

The Minister of Justice or his representative

The Minister of Hydraulic Energy or his representative

The Minister of Rural Development and the Environment or his representative

The Minister of Planning or his representative

The Commissioner for the Advancement of Women or her representative

The representatives of the development partners involved in the implementation of the Plan of Action.

11. The commission has three subcommissions:

The subcommission to monitor the section on the survival of children, chaired by the Minister of Health or his representatives;

The subcommission to monitor the section on the development of children, chaired by the Minister of Basic Education or his representative;

The subcommission to monitor the section on the protection of children, chaired by the Minister of Justice or his representative.

12. The commission has already met under the chairmanship of its President. The Minister of Health, Solidarity and Elderly Persons and the subcommissions have held several working meetings.

II. INFORMATION AND PUBLICITY ON THE RIGHTS OF THE CHILD

A. Strategies and activities for the dissemination of the rights provided for in instruments on the rights of the child

1. Strategies

13. Identification of problems relating to the protection, survival and development of children and protection of children. In this context, the situation of children in difficult circumstances (street children, disabled children) has been studied and analysed. National law has also been studied and codified to bring it into line with the Convention (14 and 15 June 1993).

14. The formulation and adoption by the Government of the National Plan of Action for the Survival, Development and Protection of Children, which has been implemented with the participation of the development partners.

15. The establishment of structures such as the Interministerial Monitoring Committee, associations for the protection of children and coordinating bodies for programmes and projects for children. Activities which have been carried out to promote the Convention include:

(a) Television documentaries, quizzes and round tables with the participation of children;

(b) Television and radio mini-series on the situation of children in urban settings;

(c) The production and broadcasting of a radio serial, "Sahel Sama", on problems of nutrition;

(d) The design, production and distribution of posters and T-shirts on children in difficult circumstances and girls;

(e) The publication of articles in State and private newspapers;

(f) The production and distribution of theatre plays and sketches to make parents aware of the Expanded Vaccination Programme (PEV) with the participation of children;

(g) The organization of sporting events with the participation of children;

(h) The production and distribution of pamphlets on the text of the Convention, AIDS, excision and the Expanded Vaccination Programme (PEV).

16. The annual celebration of African Children's Day (16 June). This day is celebrated throughout the national territory. Social mobilization activities focusing on major priority health programmes such as vaccination and breastfeeding are carried out for an entire week. Lectures and discussions are also organized and, in 1994, there were four on the situation of children in difficult circumstances. These lectures made it easier to understand the problem and increased the authorities' awareness of the need for appropriate measures. They also enabled them to coordinate activities and harmonize prevention, action and social rehabilitation strategies.

17. The "Children's Parliament", which is organized each year and is a platform where children can speak out freely and question the authorities about their basic concerns, including those relating to the national plans of action on the survival, development and protection of children.

18. The translation of the Convention into the national languages, Bamanan and Soninké. To this end, booklets such as "Savoir pour sauver" and others on AIDS, excision and the text of the Convention have been translated and disseminated. According to UNICEF statistics, nearly 25,000 booklets have already been distributed.

2. Follow-up machinery

19. Mali's ratification of the Convention in 1990 and the socio-political context resulting from the March 1991 incidents led to the establishment of a dynamic associative sector. At present, there are more than 15 national child protection associations helping to disseminate the Convention at the community level. These associations harmoniously supplement the efforts of Government technical departments. The Committee set up to draft the initial report is

composed of representatives of ministerial departments responsible for children, associations and national non-governmental organizations.

B. Strengths and weaknesses

1. Strengths

20. The activities carried out on behalf of children have definitely made a great deal of knowledge of the Convention available. The Children's Parliament, the translation of the Convention into national languages and the establishment of a national coordinating body and an intersectoral committee are undeniable achievements. Socio-economic values have, moreover, always made children the focus of the concerns of families and society.

2. Weaknesses

(a) Insufficient involvement of the media

21. Despite the efforts that have been made, radio and television are not involved enough in the cause of children. At seven radio stations and one television station surveyed, only 12 hours, 42 minutes, of 809 hours of programmes per week are on children between the ages of 4 and 15, i.e. 1.56 per cent of programmes. According to the various sources of information, this situation is the result of the lack of financial, material and human resources needed for the production of quality broadcasts.

(b) Centralization

22. Because coordination and monitoring machinery is centralized in the regional capitals and the Bamako district, much of the country is not involved in providing and disseminating information on the Convention.

(c) Social and cultural obstacles

23. The high illiteracy rate is an obstacle to the dissemination of the Convention. The ideas of freedom of expression, thought, conscience and religion and respect for the privacy of children are not easily accepted in Malian society, in which parents are always responsible for children.

(d) The country's lack of resources

24. The proper implementation of the Convention requires that specific activities and measures should be carried out, in addition to the usual ones. In Mali's particular context, political will is often hampered by a definite lack of resources.

C. Prospects

25. Despite the efforts that have been made, it must be recognized that information and publicity on the Convention are still limited. Mali is therefore considering the possibility of:

(a) Introducing the study of the Convention in school curricula;

(b) Establishing Government/associations coordination machinery;

(c) Providng training and information for potential targets such as elected officials, teachers, parents, judges, social workers, communicators etc.;

(d) Producing a news letter on the Convention;

(e) Drafting and disseminating a code on the protection of children accordance with the provisions of the Convention.

III. DEFINITION OF THE CHILD

26. According to the Convention on the Rights of the Child, a child is any human being below the age of 18 years ("For the purposes of the present Convention, a child means every human being below the age of 18 years unless under the law applicable to the child, majority is attained earlier"; art. 1 of the Convention). In Mali, the age of majority is not uniform: it varies between 18 and 21 years of age, depending on the code and the subject-matter in question; the age of majority is not the same in civil, social and political matters.

A. Criminal responsibility

27. In criminal matters, the age of majority is 18 years. Articles 1 and of Act No. 87-98/ANRM of 9 February 1987 on the criminal respnsibility of minors and the establishment of juvenile courts and of the Penal Code, respectively, provide that: "The age of majority is 18 years". A child belo the age of 13 years is thus legally incapable. From 13 to 18 years, his criminal responsibility may be engaged only when the court decides that he acted knowingly; even in such a case, his responsibility is specifically regulated so that legally proceedings are designed more for protection than for punishment.

B. Consent to marriage

28. In civil matters, the age of majority is 21 years (art. 388 of the Civ Code). The Marriage and Guardianship Code indirectly sets the age of majori at 21 years for boys and 18 years for girls. A boy may thus legally contrac marriage in an independent way at age 21 and a girl, at age 18. "A boy who has not reached the age of 21 and a girl who has not reached the age of 18 m not contract marriage without the consent of their parents" (art. 11 of the Marriage and Guardianship Code).

29. However, the law allows a boy aged 18 years and a girl aged 15 years t marry with the consent of their parents. Article 4, paragraph 1, and article 11 of the Marriage and Guardianship Code read: "A boy who has not reached the age of 18 and a girl who has not reached the age of 15 may not contract marriage ..." and "A boy who has not reached the age of 21 and a gir who has not reached the age of 18 may not contract marriage without the consent of their parents".

C. Consent to sexual relations

30. The Penal Code protects the sexual integrity of children up to the age of 15 by punishing any sexual relation or any act of a sexual nature committed against them, even with their consent (arts. 180-182 of the Penal Code). "Any indecent act committed or attempted, without violence, against a child of either sex below the age of 15 years shall be punishable by 5 to 10 years' forced labour and, optionally, 1 to 20 years' expulsion ..." (art. 180 of the Penal Code); "Anyone who carries out or attempts to carry out the customarily authorized sex act with a girl below the age of 15 years shall be liable to 1 to 5 years' imprisonment" (art. 182 of the Penal Code).

D. Work and employment

31. Social legislation prohibits "employing women and children in work for which they are not strong enough, which involves danger or which, because of its nature and the conditions in which it is performed, may be contrary to moral standards". The enabling act contains detailed provisions on work prohibited to children and the age limits for employing a child for a particular task. The minimum age for employment is 14 years, but the enforcement of legislation in this regard is very difficult because of the country's economic situation: the informal sector hires young people for work which is not always authorized by law. There are also some apprenticeship traditions which involve the employment of children. This explains Mali's reservation to article 32 of the Convention.

E. Enlistment in the army

32. The minimum age for enlistment in the army, as well as for conscription, is 18 (National Youth Service).

IV. GENERAL PRINCIPLES

A. Non-discrimination (art. 2)

33. Article 2 of the Constitution provides that: "All Malians are born free and equal in rights and in duties. Any discrimination based on social origin, colour, language, race, sex, religion and political opinion is prohibited". No discrimination is thus tolerated in Mali. The basic texts strengthen and supplement this constitutional provision in detail. Its implementation may nevertheless give rise to problems which are the result of cultural and economic factors, as in the case of school attendance by girls and by boys, as well as by children in rural areas and in towns. Considerable efforts are now being made to eliminate these disparities in conditions.

B. Best interests of the child (art. 3)

34. The preamble to the Constitution itself attaches particular importance to the protection of the rights of children and women. Several texts emphasize the protection of the best interests of the child. In accordance with article 3 of the Convention, articles 12, 86, 87 and 91 of the Marriage and Guardianship Code provide for the protection and safeguarding of the best interests of the child in all circumstances. Article 12 of the Marriage and

Guardianship Code reads: "In the event of disagreement between parents who are divorced or separated, the administrative authorities shall take a decision based on the interests of the child". Article 86 provides that: "Custody of the children shall be given to the spouse who has obtained the divorce unless the court or the Public Prosecutor's Department decides, on the basis of information collected in accordance with article 85 above and for the benefit of the children, that all or some of them shall be placed in the custody either of the other spouse or of a third person".

35. These provisions are scrupulously complied with by the courts, whose decisions always take account of the best interests of the child. The same attitudes prevail in other areas. Texts relating to health and education emphasize the need to protect the interests of the child as a matter of priority (expanded vaccination programme, social welfare and health services and infant and maternal protection programme). A number of provisions of the Family Relations Code and the Civil Status Act emphasize the best interests of the child, particularly in respect of filiation, civil status, etc.

C. The right to life, survival and development (art. 6)

36. Article 1 of the Constitution provides for the right to life and survival: "Every human being is sacred and inviolable. Everyone has the right to life, liberty, security and integrity of person". Several internal law texts provide for and protect this right in greater detail. Under the heading of several offences, for example, the Penal Code protects children against any acts against their life or survival. Infanticide, abandonment and failure to provide food and care to a child are harshly punished. The law backdates the protection of the child to the stage of conception by making abortion punishable.

D. Respect for the views of the child (art. 12)

37. Article 12 of the Convention stresses the participation of the child and respect for his opinions, but Malian legislation and tradition are not actually in keeping with this provision. Efforts have to be made to guarantee this right more fully.

V. CIVIL RIGHTS AND FREEDOMS

A. Name and nationality (art. 7)

38. Articles 7 and 8 of the Convention relate to the civil status of the child (name, nationality, domicile, adoption). Internal legislation is generally in keeping with the Convention's concerns. Several codes and acts contain a set of provisions on the civil status of the child, including the Family Relations Code, the Nationality Code, the Marriage and Guardianship Code and Civil Status Act No. 87-27/ANRM.

39. All these texts contain relevant provisions which guarantee the child his name and his nationality. The birth of any child must be declared, regardless of the place of the birth, and the declaration must be made within 30 days:

"The birth of any child born live in the territory of the Republic of Mali must be declared to the Civil Registry Office of the place of the birth, even where the foreign parents have declared this birth to the consular authorities of their country.

"Any birth during travel by road, rail, river or air shall be declared to the Civil Registry Centre of the first stopover place" (art. 75 of the Civil Status Act).

40. Problems are involved in recording, organizing and preserving civil status documents. Very considerable efforts have been made to remedy these shortcomings and there have been definite and constant improvements.

41. With regard to nationality, the Nationality Code is particularly open to taking account of the situation of every child in Mali. It allows for flexibility so that nationality may be granted to any child within the territory of the country and so that cases of statelessness may be avoided.

B. Preservation of identity (art. 8)

42. The name given cannot be changed except by operation of the law. A change of name can be made only by specific legal procedures designed to protect identity.

C. Freedom of expression (art. 13)

43. Article 13 of the Convention expressly recognizes the right of children to freedom of expression. The exercise of this right is recognized by the Constitution and governed by legislation recognizing the right of every person to freedom of expression. There are publications for young people and forums where they may express themselves, such as the Children's Parliament, cultural centres, etc.

D. Access to information (art. 17)

44. Children have the right to access to wholsesome information. Such access is governed by law in order to protect the moral integrity of young people from corruption and moral danger. It is thus prohibited in Mali to show certain films (violent, sexual, erotic or pornographic) to children and to disseminate obscene publications. Accordingly, a national film censorshp committee and judicial bodies monitor legal measures to protect the sexual and moral integrity of children.

E. Freedom of thought, conscience and religion (art. 14)

45. The Constitution formally recognizes these rights and guarantees their exercise: "Everyone has the right to freedom of thought, conscience, religion, worship, opinion and expression, as well as creative freedom, based on respect for the law" (art. 4). The texts do not refer specifically to the situation of children. According to tradition, parents keep a close watch on the exercise of these freedoms by their children.

F. Freedom of association and of peaceful assembly (art. 15)

46. Article 5 of the Constitution provides that: "Under the terms set by law, the State recognizes and guarantees freedom of movement, free choice of residence and freedom of association, assembly and demonstration". Malian traditions are in favour of the exercise of this right. Malian society has always tolerated and even encouraged young people to join associations and age groups, as well as peaceful assemblies and demonstrations by these groups.

G. Protection of privacy (art. 16)

47. "The home, the private and family sphere, and the secrecy of correspondence and communications shall be inviolable. They may be interfered with only as provided for by law" (art. 6 of the Constitution). The law places limits on the exercise of these rights by allowing parents, in the exercise of their parental duties, to supervise the company their children keep and censor their correspondence. The courts also have full freedom to adopt any measures designed to safeguard the best interests of the child.

H. Right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment (art. 37)

48. Article 3 of the Constitution provides that: "No one shall be subjected to torture or inhuman, degrading or humiliating treatment or punishment. Any person and any government official guilty of such acts, committed either on his own initiative or on orders, shall be punished in accordance with the law". Several texts protect children against violations of this provision. Persons who commit certain violations are prosecuted and the responsibility of the parents is engaged in the event of negligence in the supervision of the child. There are, however, certain traditional practices which are contrary to the Constitution such as excision. At present, a broad awareness-raising campaign is being carried out with a view to its abolition.

49. Mali has been making remarkable efforts in law making and institutional terms to have juvenile delinquency dealt with by the courts. The administration of juvenile criminal justice is improving, but major problems still have to be solved. Mali intends to establish juvenile courts and special procedural mechanisms to deal with juvenile delinquency (Act No. 87-98/ANRM of 9 February 1987).

50. The Bollé Rehabilitation Centre houses juvenile delinquents with a view to their rehabilitation and reintegration by teaching them a trade in flexible and open conditions of "detention". In fact, however, material and institutional problems mean that the objectives have not all been achieved. Some young persons are being held in prison and other rehabilitation centres and juvenile courts have not yet been established. Existing facilities have operating problems. Noteworthy reforms and constant improvements have been made in institutions and the normative framework, including the renovation of the Bamako Juvenile Court and the Bollé Observation and Rehabilitation Centre in Bamako.

VI. FAMILY ENVIRONMENT AND ALTERNATIVE CARE

51. In Mali, the family is the group unit of society. It is composed of all persons who can establish their relationship with a common ancestor who actually existed. It is a genuine and active solidarity group. Blood relations are constantly putting the security of family life to the test. Its balance and durability therefore needs constant care. As a decision-making, education and training centre, it is the crucible in which basic moral values are acquired and preserved. It shapes the individual according to the requirements of life in society.

52. The family is also a legal reality because it is based on the union of man and woman, as confirmed by marriage. This union is such that the children born of it are recognized by society as the legitimate descendants of the two partners. It confers social and legal status on the two partners and their descendants. Malian law thus lays down all the conditions required so that this act reflects its importance, in view of the serious consequences arising out of it.

53. In the light of all these factors (sociological and legal), the family gives the child the psychological and emotional elements he needs for the development of his personality. Since independence, all social policies on behalf of children have therefore given priority to non-institutional educational support and foster care. This is why few reception and custodial institutions have been set up in the country.

54. However, the extended family, which is the basis for the country's traditional social welfare system, is being weakened as a result of social and economic changes. This is particularly true in urban areas. The child social welfare policy encourages a great deal of involvement by associations and non-governmental organizations and is helping to create a partnership between government departments and associations.

A. Parental guidance (art. 5)

55. In Mali, children are valued highly, both in the traditional family and in society that is now becoming modernized. Family authority is characterized by the unity of the family, by mutual respect and by solidarity among the members. Within the family, the child develops under the watchful eye of the parents, who are quick to correct faults, bad language and misbehaviour. Even outside the family, a child's education is seen to by society, in which the feeling of shared interests, shared lives and a shared future is so deeply rooted. The parents are responsible for the child's education throughout the period while he is a minor. They decide how he is to be educated, what instruction he is to receive and, in some cases, which occupation he is to choose. Parental authority involves the right to care for, guide, watch over and punish the child.

56. As a result of the close relationship between mothers and children and, in particular, between mothers and girls, the mother's living conditions have a direct impact on those of the child. In the traditional environment, girls are the mother's "helpers" for the housework that has to be done: carrying water and wood, doing dishes and laundry, cooking, babysitting, taking meals

to persons working in the fields, gathering, and keeping the shop; they also help the mother collect their trousseau. This situation mainly affects the schooling of girls: the mother prefers to keep them at home rather than sending them to school.

57. It must, however, be recognized that parental authority is now becoming increasingly weaker because parents are becoming poorer. Social and cultural disruption, which breaks down emotional ties between parents and between parents and children and is common in urban areas, is beginning to occur in rural areas as a result of the flight from the land.

58. It is the duty of the parents to send their children to school as from pre-school age. The right to education and instruction is embodied in the Constitution (arts. 17 and 18). The educational reform carried out in 1962 made education compulsory, mixed and free of charge. At present, however, schools in Mali are suffering from problems such as the lack of infrastructures, the low attendance rate, under-attendance by girls and their low literacy rate, the parents' low socio-economic level and the fact that schools are not adapted to the country's socio-economic needs.

59. Texts on the protection of the child that have been in preparation for two years include the Social Protection Code and the Code on the Wellbeing and Protection of the Child. Other texts are being considered on second reading to adapt them to developments in the rights of the child (Marriage and Guardianship Code).

B. Parental responsibilities (art. 18, paras. 1 and 2)

60. In traditional society, parental authority was exercised by the entire community, which had a say in the development of the personality of the child. Every adult considered himself responsible for the education and support of children, regardless of the degree of their relationship. Under article 82 of the Malian Family Relations Code, "parental authority is the set of rights and duties of a mother and a father towards the person and property of their unemancipated minor children"; and article 33 of the Marriage and Guardianship Code provides that, as a result of marriage, the spouses "have an obligation to ensure the moral and material guidance of the family, to feed, maintain and raise their children and to prepare them to be independent". Parental authority is the corollary of procreation. It enables the parents to monitor their children's education, supervise their relationships and correspondence and place problem children in the appropriate institutions (art. 84 of the Family Relations Code).

61. The weakening of the system of traditional education as a result of the breakup of the extended family caused by social changes and the collapse of the purchasing power of heads of household has undermined parental authority. There are many children whose parents cannot pay the costs of education and maintenance. This failure by the parents to carry out their duties under the law forces the children to live in the streets of large towns, since they do not have legal capacity and the means to force their parents to fulfil their legal obligations. Sociological and Cultural circumstances are not conducive to action of this kind.

C. Separation from parents (art. 9)

62. In Mali, a child is traditionally regarded as everyone's child and the idea of separation of parents and children was virtually unknown. The deteriorating purchasing power of households is increasingly preventing many parents from assuming their responsibility of educating their children. Several types of separation from the parents are thus taking place:

(a) Separation ordered by the court, which entrusts the children to one of the parents, depending on the interests of the children; in this way, contacts with the parents are not broken off completely;

(b) Separation because the biological parents give the custody of their children to a third party, who may be an uncle, an aunt, a brother, a friend of the family or a marabout; in the latter case, the child may be the victim either of the foster family's situation or of economic exploitation;

(c) Separation as a result of the death of the parents: an orphan child is automatically taken in by the other members of the extended family; at worst (in urban areas), he is entrusted to the social welfare department and may be adopted later;

(d) Separation as a result of a child's imprisonment, which is, according to the legal texts, quite unusual. Children involved in proceedings in juvenile courts are entitled to treatment which preserves their sense of dignity and self-worth. During proceedings in camera only witnesses, members of the bureau, close relatives, the child's guardian or legal representative and representatives of the department or institution caring for him are allowed to be present.

63. In all cases, Malian law provides for means of protecting the interests of the child (Family Relations Code, Marriage and Guardianship Code). However, activities for taking in and listening to children at odds with society are still insufficient. For the country as a whole, there is a reception and placement centre in Bamako, an observation and rehabilitation centre in Bamako and four counselling centres, two in Bamako and two in Mopti. Non-institutional educational activities are carried out by associations.

D. Family reunification (art. 10)

64. In accordance with article 10 of the Convention, Malian legislation places no restrictions on family reunification. The problem of preventing a child from leaving or entering Mali to join his parents has never arisen. All administrative facilities are granted to nationals and foreigners for the purpose of family reunification.

E. Recovery of maintenance for the child (art. 27, para. 4)

65. Everyone has an obligation to meet the child's nutritional needs. Maintenance for the child is recovered in several ways:

(a) In the context of social welfare, by State social services at the request of parents who have no resources. Such action cannot be counted on because of the limited means made available to the social services;

(b) Charitable activities of religious bodies;

(c) Charitable activities of associations.

Recovery is not systematic. In addition, financial problems and poverty prevent many heads of household from fulfilling maintenance obligations: food obligations, parental authority, education and support.

F. Children deprived of a family environment (art. 20)

66. Orphaned, abandoned and foundling children receive particular attention both from government departments and from civil society. In traditional societies, there always have been and still are mechanisms for taking care of orphans and abandoned children. Orphans are automatically taken in by traditional solidarity mechanisms that are part of the extended family (sometimes as a result of remarriage to a close relative of the deceased parent). In urban areas, where traditional solidarity does not work well, orphans, abandoned children and children whose parents are mentally ill are taken in by the social services and receive the necessary social protection.

67. Even in the absence of foster care legislation, the State has been encouraging private and community initiatives for the past five years. Efforts are thus being made to increase the awareness of families and individuals and to develop networks of solidarity in favour of children. Reception facilities are rare. The lack of placement centres is also the result of the fact that Mali has given priority to action by the extended family and to foster care; institutionalization is the last resort. In addition to orphans and abandoned children, parents entrust their children to marabouts for religious training; these children, who are called "garibus", are usually left to their own devices and survive by begging in towns.

68. Apart from efforts to increase awareness and the contacts established with some Koranic masters (marabouts), child support activities are still not very common. Projects for children in need of assistance are being implemented with the support of UNICEF, Aide à l'Enfance-Canada, Enda Tiers-Monde, Caritas Mali, Fondation pour l'Enfance, Association Terre de Vie and other associations.

G. Adoption (art. 21)

69. Adoption is defined as the establishment by court order of ties of filiation between a minor and a couple or a single person unrelated by blood. Order No. 36/CMLN of 31 July 1973 containing the Family Relations Code provides for two types of adoption: adoption for protection and adoption for filiation. Adoption for protection allows any adult person to adopt one or more children (art. 56 of the Family Relations Code). It applies to orphaned or abandoned children or children whose parents or guardians have consented to their adoption. Candidates may be nationals or foreigners (art. 59, para. 1, of the Family Relations Code). Adoption for filiation creates ties equivalent

to legitimate filiation. It applies only to abandoned children, children whose parents are unknown and children whose mother and father have died without leaving relatives who can assume responsibility for them.

70. Adoption is also a custom in Mali. A child may be entrusted to a member of the family or a friend of the family, who has to meet the child's needs or be held responsible by the community. Adoption involves filing an application with the Social Welfare Department, which conducts a social investigation into the candidate's resources, moral standing and social life. The adoption committee of the National Social Welfare Department considers cases and transmits drafts to the court, which decides on a case-by-case basis. The courts enforce adoption law. It is the obligation of the person wishing to adopt "to feed, house, maintain and raise the adoptee and prepare him for adult life" (art. 60 of the Family Relations Code); he exercises parental authority.

71. The main problems relating to adoption are the lack of administrative follow-up of adopted minors by the competent departments; ignorance of legislative texts on the part of the biological parents, who are inclined, in urban areas, to get rid of their children; law enforcement; the precarious status of adopted children; and failure to comply with administrative and judicial procedures.

H. Illicit transfer and non-return (art. 11)

72. Mali has ratified the Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others. Provisions have been adopted on the guardianship of orphaned and abandoned children by reception and custodial institutions:

(a) No natural or legal person may establish a social welfare institution without the authorization of the Social Welfare Department;

(b) The Government does not encourage the establishment of orphanages and tries to make the public aware of community approaches to the integration and social rehabilitation of children;

(c) There are two institutions for orphaned and abandoned children which are under the authority of the Social Welfare Department;

(d) Illicit transfers are systematically checked at the country's borders;

(e) Kidnapping is harshly punished by Malian law, which provides for a penalty of forced labour (art. 187 of the Penal Code).

I. Abuse and neglect (art. 19), including physical and psychological recovery and social reintegration (art. 39)

73. Measures have been taken to protect children against abuses:

(a) Order No. 62/CMLN of 1 December 1973 on rape, indecent assault and incitement to immoral behaviour;

(b) Information, education and communication activities are carried out for the population on harmful practices such as excision.

74. Special attention is paid to disabled children in the social protection policy. Several institutions for disabled children have been set up:

(a) The Soundiata Centre, commune III, Bamako;

(b) The Medical-Psychological Education Centre operated by the Malian Association to Combat Mental Deficiency in Children (AMALDEME);

(c) The Centre for the Rehabilitation of Persons with Physical Disabilities (Bamako, Ségou and Gao);

(d) The Institute for Blind Youth (Bamako and Gao);

(e) The School for Young Deaf and Deaf Mute Persons; and

(f) Community-based rehabilitation in Bamako, Tienfala, Kayes and Niono.

75. There are, however, enormous problems involved in implementing social welfare policies for children: the lack of qualified staff; the underequipment of institutions; inadequate legislative texts; the marginalization of children in difficult circumstances; and the unfavourable economic situation. The social welfare programmes that have been implemented relate, in particular, to:

(a) Support and street activities for children at odds with society; establishment of learning and listening centres in Bamako and Mopti;

(b) Income-earning activities for street children;

(c) Creating awareness of the situation of beggar children.

J. Periodic review of placement (art. 25)

76. The regulations in force provide for the regular follow-up of children placed in families or institutions by the technical social welfare services. It must, however, be recognized that such follow-up does not take place very regularly because human and material resources are lacking. As a result of heavy urbanization, the number of children living in difficult circumstances is increasing in urban areas, particularly Mopti and Bamako.

Table 1

SITUATION OF CHILDREN PLACED OR MONITORED INSTITUTIONS AND ASSISTANCE PROJECTS FOR CHILDREN IN DIFFICULT CIRCUMSTANCES

(1994)

INSTITUTIONS	STAFF	REGIME	STATUS	CATEGORY OF CHILDREN	OBSERVATIONS
Reception and family placement (Bamako)	22	Boarding	State	Abandoned children, orphans and hardship cases	
Association Rayan Soleil du Mali Centres (ARSEM) (Bamako)	30	Boarding	Private	Abandoned children, orphans and hardship cases	
Bolle Observation and Rehabilitation Centre (Bamako)	28	Boarding	State	Juvenile delinquents	
Kanuya Centre (Bamako)	52	Boarding Non-resident	Private	Street children	
CARITAS homes (Bamako)	12	Boarding	Private	Street children	
"Action Mopti"	15	Boarding Non-resident	Private	Street children	In cooperation with the State
SOS Children villages (Sanankoroba)	123	Boarding	Private	Abandoned children, orphans and hardship cases	
AMALDEME Centre	418	Non-resident	Private	Mentally handicapped children	90% State staff
ENDA Tiers-Monde (Bamako)	506	Non-resident	Private	Street children Child labourers	Vocational training for street children
Fondation pour l'Enfance Listening Centre (Mopti)	100	Non-resident	Private	Street children	
Association Terre de Vie (Bamako)	300	Non-resident	Private	Children at odds with society	
CARITAS Listening Centre (Bamako)	100	Non-resident	Private	Street children	
Rehabilitation centres for the physically disabled Bamako, Ségou and Gao	234	Non-resident	Mixed	Physically handicapped children	In cooperation with the State
Institute for Blind Youth, Bamako and Gao	138	Mixed	Mixed	Visually handicapped children	In cooperation with the State

INSTITUTIONS	STAFF	REGIME	STATUS	CATEGORY OF CHILDREN	OBSERVATIONS
Experimental Centre for Young Deaf Mutes (Bamako)	42	Non-resident	Mixed	Deaf and deaf mute children	In cooperation with the State
Association d'aide et solidarité enfance-Mali (Bamako)	390	Non-resident	Private	Street babies	Experimental project
Children's Guidance Centre (Aide à l'Enfance-Canada) (Bamako)	80	Non-resident	Private	Children at odds with society	
Soundiata Centre (Bamako)	301	Non-resident	State	Physically handicapped children	Treatment
TOTAL	2 891				

VII. BASIC HEALTH AND WELFARE

77. In order to improve the health situation and give the population, particularly children, the best possible state of health, Mali adopted, on 15 December 1990, the Sectoral Health and Population Policy Statement, one objective of which is to improve the state of health of children. This sectoral health policy is designed to increase health coverage by integrating activities through the Minimum Activities Package (PMA), including activities for children. However it must be recognized that the health services made available to children are not designed to meet some specific needs, especially with regard to sexual health and reproductive health.

78. The activities carried out are intended to expand health coverage through the establishment of community health centres, the improvement of the quality of services and the creation of a viable and effective health system with participation by and responsibility of the population for the management of health services, in accordance with the recommendations of the World Summit for Children. In October 1992, Mali drafted and adopted the National Plan of Action for the Survival, Development and Protection of Children 1992-2000, whose implementation is under way. This document, which is an expression of political will, takes account of all sectoral and national concerns relating to respect for the rights of the child. The provisions in question are in keeping with articles 6, 23 and 24 of the Convention on the well-being of children.

A. Survival and development (art. 6, para. 2)

79. The efforts that Mali has been making are designed to reduce the high maternal and infant mortality rates and bring them down to acceptable levels. In this connection, attention is drawn to the following activities:

(a) Programmes of action, which are being implemented, to combat priority child diseases such as malaria, acute respiratory infections, malnutrition, diarrhoea, illnesses targeted by the Expanded Vaccination Programme (PEV) and waterborne diseases;

(b) The strengthening of social and health infrastructure and equipment, particularly through the promotion of Community Health Centres (CHCs) in the health fields agreed to by the population;

(c) The installation of nearly 1,000 modern standpipes in the context of rural and urban water supply systems (1990-1995);

(d) The training of social welfare and health-care personnel in correct case management;

(e) The integration of activities by means of the Minimum Activities Package (PMA), according to the technical plateau and the level on the health pyramid (basic care, referral care);

(f) The organization of community participation in social and health services management (management boards, management committee, executive board).

80. These activities are all part of a sectoral social and health development plan consisting of the health map negotiated with the population, government technical departments, development partners and NGOs. Community organizational work is a lengthy process that requires a great deal of effort on the part of social welfare and health-care staff to facilitate the establishment of CHCs and the revitalization of district health centres (DHCs).

81. In this context, 140 CHCs and revitalized DHCs had already been set up as at 30 April 1996 and efforts are continuing. The improvement of medical and technical infrastructure and equipment, the development of the technical capabilities of social welfare and health-care staff and information, education and communication are essential components of mobilization to guarantee better health for the country's children.

1. Formulation of sectoral health development plans

82. The formulation of a sectoral health development plan (PDSC) is a lengthy process that often lasts for more than one year. It is an important step in developing the capabilities of the sectoral social welfare and health-care team and preliminary negotiations between it and the local authorities. The actual amount of time spent on the drafting of the plan is estimated at 10 weeks: in view of the time needed for discussions and negotiations at each stage and for ordinary activities, there is no possibility of reducing the amount of time it takes to draft a plan without jeopardizing the chances of approval by the persons concerned.

2. Establishment of the minimum activities package with community management

(a) Revitalization and establishment of community health centres

83. This activity is being carried out by means of the revitalization of district health centres (DHCs) (existing public facilities) and the establishment of community health centres (CHCs) to expand health coverage.

In all cases, activities are based on the sectoral health coverage map, which is gradually taking specific shape in a negotiated and dynamic way.

84. Revitalization got off to a slow start. The community management of a existing State facility was not as easy as that of a CHC. Only after the adoption of the interministerial decree organizing the management of CHCs di revitalization begin to make significant progress. According to the decree, all DHCs will eventually be converted into CHCs and will be managed by community health associations. The revitalized DHCs will, however, guarante coverage of district areas which still do not have a CHC. This measure assures the continuity of the preventive benefits guaranteed in accordance with the forward-looking strategy.

85. Support for the establishment of community health centres and revitalization was provided in addition to the Health, Population and Rural Water Supply Project (PSPHR) in the regions supported by this Project. UNICEF's support is being used to establish pilot CHCs. It enables districts to meet one of the eligibility criteria for the financing of a health development plan and it is also used for revitalizations that are not or hardly taken into account in the planning of the PSPHR, which places greater emphasis on expanded coverage and the strengthening of the referral plateau.

86. Achievements have not kept pace with those programmed in the sectoral plans, but they have been speeded up. Efforts to establish the Minimum Activities Package with community management were based on support from the UNICEF Health Programme and the PSPHR in 1993 and 1994. In 1995, greater support began to be received from bilateral cooperation agencies as a result of the determination of the Malian Ministry of Health to get all partners to implement the sectoral policy.

(b) Performance

87. The performance of the first pilot CHCs differed from that of first-level services in Mali in terms of quality, health-care coverage and the organization and management of health centres. This difference must not conceal the fact that there are defects and constraints to be removed so that high quality and efficient health services may be offered, but it shows that considerable progress is possible and is an incentive for everyone. Usually, government nurses, rather than doctors, are the ones who assume technical responsibility for the services provided by the CHCs.

Range of activities

88. Although the range of activities necessarily includes curative, preventive and promotional aspects, only a few activities are offered, with a moderate selection of the treatments available receiving the appropriate training and support. In addition to treatment of common diseases, the comprehensive examination of infants is provided for, with nutritional follow-up and vitamin A supplements. Other services offered are vaccinations, encouragement of spacing between births, normal deliveries and prenatal and family-planning consultations.

89. Sexually transmitted diseases (STD) are, however, not yet receiving adequate support; little or no attention has been paid to the treatment of chronic diseases outside of the existing vertical programmes (leprosy and tuberculosis).

Quality of curative care

90. Supervisory sessions indicate that training has had a positive impact and led to the more rational prescription of medicines, but, according to an outside evaluation of the PSPHR, the level of diversity and accuracy of diagnoses remains low. The referral rate, which is rarely higher than 1 per cent, suggests that the nurses dispose of the obvious emergency cases and very rarely refer cases in advance.

Organization and microplanning of activities

91. All CHCs have a microplanning system and calendar for all activities in the centre and mobile activities in the villages. The microplan is agreed on in consultation with the Community Health Association (CHA); villagers are then informed of the day on which the visiting nurse will come to their village. These periodic visits have not only helped to improve health services in the villages (vaccinations, nutritional follow-up, vitamin A supplements, monitoring of high-risk pregnancies, continuity of treatment provided by the CHCs), but also make the villagers' feel that they are a part of the health network, strengthen solidarity between villages and help advance the community health centres.

Coverage attained

92. The results achieved have been very encouraging. Coverage for preventive activities in the CHC health areas has been good, indeed very good, since the first year of activity. Coverage for vaccinations against diphtheria, tetanus, whooping cough and polio for children from 0 to 11 months has been 80 per cent and above in many CHCs and revitalized DHAs. These results were possible because local costs were self-financed.

93. For curative activities, there has been a definite increase in doctor's visits in Mali in comparison with the average in the past, but relatively little use is made of consultations for curative purposes. Centres whose staff have both good clinical skills and good relations with the local population often achieve the best results.

94. Results in the area of family planning activities have been modest, but significant, no doubt partly owing to the fact that efforts to develop family planning activities were separate from and insufficiently coordinated with the establishment of the CHCs.

95. In the Djenné sector, which revitalized all its district health centres and established six new community health centres between 1994 and 1995, coverage increased by 100 to 150 per cent the first year in the areas concerned, although a system for dispensing essential medicines had been established as early as 1989. Nevertheless, PEV coverage has remained under 80 per cent and appears to be hovering at 50 and 60 per cent according to

area. This sector is one of the flooded areas where many villages are inaccessible from four to six months per year and vaccination coverage was generally 20 per cent or lower, even between the health centre and the referral plateau. The installation of a solar-powered refrigerator has increased the centre's autonomy, but has not solved the problem of access to remote villages. Local adjustments to the strategy will be needed to eliminate this problem.

Financial accessibility

96. There has been a marked improvement in financial accessibility; the average cost of prescriptions issued by the centres varies between 40 and 120 CFA francs (1995) and that of a course of curative care between 600 and 1,400 CFA francs. The centres with the highest average costs are those which did not have a medicine supply system providing them with a full range of International Nonproprietary Names (INN) medicines (generic medicines), but also some CHCs run by doctors who do not use flowcharts.

97. Costs are relatively high in comparison with those found in other countries of the subregion. In addition to the fact that Mali is a land-locked country, personnel costs are fully or partially self-financed. In some CHCs, the number of prescriptions issued and not filled (failure rate) has been as high as 10 per cent, particularly in centres where the average cost of a course of curative care was set before the devaluation of the CFA franc. Revitalized CHCs and DHAs may also be considered to have achieved their objective when an adequate range of essential medicines is available.

98. Some community health associations have introduced mechanisms for financing care for the needy, while others have taken the view that solidarity can still be expected from families and villages, with the advantage of not straining the CHCs' budgets. A study on modern health care and the use of medicines in Commune IV in the Bamako district showed that, in nearly four cases out of five, health needs were met through the more financially accessible informal sector.

Perinatal care

99. The perinatal care programme aims at promoting a comprehensive approach in order to reduce perinatal risks: its goal is to be an entry point into the referral system. Without underestimating the importance of factors such as the competence of personnel and the technical plateau, analyses of the situation in pilot sectors and communes have stressed factors such as team organization, communication between outlying areas and hospitals, case handling logistics and the financial feasibility of urgent cases and obstetrical operations. Besides the high mortality rates involved in hospital treatment, hospitals perform only a very small proportion of the Caesareans expected.

100. A trial period proved necessary to pave the way for making this new approach operational and cooperating in the preparation of appropriate aids and modules. This aspect of the programme was implemented in four districts and two communes in the Bamako district; two national hospitals and one regional hospital were also involved. It corresponds to and supports the

implementation of the sectoral health development plan. Questions relating to the referral system are approached in consultation with communities and financing partners throughout a process that begins with the community's decision to establish a community health centre and ends when the community health associations have mastered the management of the sectoral health system.

101. The following are some of the programme's achievements:

(a) A radio network links the CHCs to the referral plateau and facilitating both their functional relations and case handling;

(b) Solar-powered lighting is provided in the maternity wings and emergency rooms of the revitalized DHAs and the CHCs, providing optimum conditions for emergencies at night;

(c) Care procedures whose financing is negotiated between the health unit and the communities in each sector. Fuel costs are generally met by the family. Some sectors are testing a flat rate which includes surgical operations (Commune V, Bla);

(d) Staff are trained in perinatal risks and familiarized with tools and other aids for case management and referral decisions;

(e) A network of support committees for the encouragement of maternal breastfeeding is operating in some areas of Bamako;

(f) The referral plateau is provided with appropriate additional equipment (instruments for Caesareans).

102. Many community health associations have been or are in the process of being set up; their task is to manage a health centre (CHC or revitalized DHA). CHA members are given a one-week training course as part of the initial training prior to the opening or revitalization of the health centre; this training is useful but insufficient and does not always correspond to the CHA members' profile. Much remains to be done to ensure that everyone fully understands these messages and to make the people increasingly responsible for developing their own capacities.

103. Women are insufficiently involved in these activities. There has been too little participation and involvement by women in the process of establishing the CHCs. Of 141 members of 10 CHAs, only 25 are women and they are rarely found in positions of responsibility. Yet women took the initiative in establishing several CHCs. Low participation by women has been attributed to conservatism and tradition and solutions are being sought by many CHAs to increase it, in particular by appointing a woman representative for each village.

4. Implementation of the Health, Population and Rural Water Supply Project

104. A workshop for implementing the Project was held from 18 to 22 January 1993, with the following basic objectives:

(a) To draw lessons from the preparation of sectoral health development plans (PDSCs) and the establishment of pilot CHCs;

(b) To prepare and adopt a plan of action for the Project as a whole during its first two years (1993-1994);

(c) To define the functional relationships among the different participants.

Despite the problems encountered, a plan of action for the various levels was established and a schedule for the sectors to fulfil conditions of eligibility was proposed.

105. Most of the objectives for 1992-1993 were met: of 306 attempts to drill wells, 189, or 61.7 per cent, were successful; 153 wells were fitted out and 12 workmen trained to maintain them. Although 1994 was not an activities programming year, it was the reference year for the mid-term evaluation of the Project. The evaluation was conducted from 5 to 23 December 1994; it focused on verifying the appropriateness of the strategic choices made, but especially on identifying deficiencies at several levels. The goal was to consolidate achievements (positive aspects) and concentrate efforts on reversing the negative trends observed in the implementation of the sectoral policy.

B. Disabled children (art. 23)

106. Although the number disabled children is not known, they account for a significant proportion of the disabled population, which is estimated at slightly over 800,000, i.e. 10 per cent of the total population of Mali. Pregnancy-related diseases, infectious diseases and, to a lesser extent, household accidents are the main causes of disabilities in Malian children. It should be noted that there is a large number of children said to be in difficult circumstances in urban centres.

107. The care of disabled children is managed by the State through the central and decentralized services of several ministerial departments:

(a) The Ministry of Health, Solidarity and Elderly People is specifically responsible for the welfare of children, disabled people and elderly people (Act No. 94-013 of 25 April 1994 establishing the National Welfare Department);

(b) The Ministry of Basic Education, through its Department of Pre-School and Special Education, established by Act No. 93-023 of 13 May 1993;

(c) The Ministry of Justice, which deals with aspects involving legal protection through its specialized children's courts and rehabilitation institutions.

108. Community associations and NGOs also work on behalf of disabled children. The community sector, governed by Ordinance No. 41 PCG of 28 March 1959, plays a leading role in managing the care of disabled children today. In addition to their information and awareness-raising

activities, community associations have taken the initiative in establishing several special education and social reintegration institutions. The community sector also receives State subsidies in various forms (human resources, financial support, etc.).

109. Legislation in this field is based on the following instruments:

(a) Convention on the Rights of the Child, ratified by Act No. 90-72/ANRM of 29 August 1990;

(b) ILO Convention No. 159 on Employment of Disabled Persons, ratified by Act No. 93-037 of 4 August 1993;

(c) The Constitution of Mali, promulgated by Decree No. 92/073/CTSP of 25 February 1993, which guarantees all citizens the right to social welfare.

110. There are no specific national regulations in this field as yet. Separate provisions can be found in legislation on the family, employment and education. On the other hand, there are still regulations in existence which constitute obstacles to the full participation of disabled children in society. In the field of education, for example, "incapacity" may still constitute grounds for exclusion (even though this provision is no longer actually applied).

111. Special measures have been taken to facilitate access to education by disabled youth:

(a) Disabilities are now considered to be an important criterion for awarding scholarships to pupils and students;

(b) The age limit for scholarships, guidance and examinations is systematically raised for disabled pupils, at their request;

(c) The campaign begun in 1981, the International Year of Disabled Persons, improved the practical situation as far as equal opportunity was concerned. This progress still needs to be consolidated through a consistent and up-to-date set of regulations governing the other aspects of life in society (physical accessibility, access to basic services, transport and leisure activities).

112. Multisectoral and inter-agency cooperation has made possible the constructive involvement in State activities of associations, NGOs and bodies such as UNICEF, WHO and the Organization for Coordination and Cooperation in the Control of Major Endemic Diseases. It has made it possible to develop a number of programmes on the prevention of disabilities and the rehabilitation and social reintegration of disabled children:

Expanded Vaccination Programme (PEV);

Programme aimed at reducing vitamin deficiencies;

National programme to combat iodine deficiency;

Programme of the National Committee on Ophthalmic Health;

Programme on Social Mobilization for Health;

Programmes of the research institutes, especially the Institut Marchoux;

Community-based rehabilitation programmes in Bamako, Kayes, Niono and Tienfala; and

Programmes for children in difficult circumstances.

113. These programmes receive support from the following specialized agencies: Centre for the Rehabilitation of Children with Motor Disabilities, Centres for the Rehabilitation of Persons with Physical Disabilities, at Bamako, Ségou and Gao, established by the Malian Association for the Advancement of Persons with Physical Disabilities; National Institute for the Blind of Mali, the Institute for Blind Youth, established at Bamako and Gao, by the Malian Union for the Blind, the Medical-Psychological Education Centre operated by the Malian Association to Combat Mental Deficiency in Children, the Centre for young Deaf and Deaf-Mutes, established by the Malian Association for the Advancement of the Deaf, the Counselling, Shelter and Accommodation Centres for Children in Difficult Circumstances at Bamako and Mopti, the Institute for the Vocational Training of the Disabled and the Soundiata Centre, Commune III, Bamako. These programmes and structures require specialized personnel and financial resources if they are to achieve their objectives. The lack of a specific legal mechanism is a major obstacle that steps are being taken to remedy.

C. Health and medical services (art. 24)

114. In implementation of article 24 of the Convention, Mali's National Plan of Action for the Survival, Development and Protection of Children (1992-2000) has set the following objectives for the health of infants and children:

(a) To reduce, by the year 2000:

The infant mortality rate from 102.3 per cent to 72 per cent;

The infant and child mortality rate from 186.2/1,000 to 120/1,000;

The maternal mortality rate from 1,000 per 100,000 to 500 per 100,000 live births;

The malnutrition rate for children under five years of age (low birth weight, moderate and severe) from 33 per cent to 22 per cent;

The mortality and morbidity rates among children from 0-5 years of age attributable to the target diseases of the Expanded Vaccination Programme;

The incidence of AIDS and sexually transmitted diseases.

(b) To eradicate poliomyelitis.

(c) To increase:

Access to safe drinking water and sanitary measures of excreta disposal from 15 per cent to 30 per cent;

Access to a minimum health services package.

Mali has also set itself a goal of increasing the use of modern contraceptive methods from 1.3 per cent to 11 per cent by the year 1997.

115. Mali attended the World Conference on Human Rights (Vienna, 1993), the International Conference on Population and Development (Cairo, 1993) and the Fourth World Conference on Women (Beijing, 1995) and endorsed the resolutions adopted by them. Mali also celebrated the International Year for the World's Indigenous People in 1993 and the International Year of the Family in 1994. Activities are under way on behalf of children, including girls, teenagers and youths, in the context of the implementation of the resolutions of these conferences. To that end, the support programmes of certain bodies such as UNFPA and USAID have been adjusted to take health and reproduction into account, with emphasis on adolescent health and sexuality, in both governmental and NGO projects.

116. The preliminary results of the Demographic and Health Survey of Mali (DHSM-II 1995-1996), published in June 1993, indicate the following:

The infant mortality rate is 123 per 1,000 live births;

The child mortality rate is 131 per 1,000 live births;

The infant and child mortality rate is 238 per 1,000 live births;

The rate of prenatal consultation of a health professional rose from 31.4 per cent in 1987 to 46.9 per cent in 1995;

The rate of births assisted by a health professional is 40 per cent;

The rate of deliveries assisted by traditional birth attendants in rural areas is 24.9 per cent;

The rate of preventive care for children from 0 to 5 years of age is 43.86 per cent and of infants from 0 to 1 year of age, 82.31 per cent.

Table 2

Estimated immunization coverage of children from 0 to 11 months

Vaccine	1992	1993	1994	1995	EDSM-II
BCG	70%	77%	67%	78.8%	76.3%
Polio 0	0	16%	27%	%	28.3%
*DPT1P1	65%	77%	63%	71%	71.6%
*DPT2P2	47%	60%	48%	59%	51.1%
*DPT3P3	38%	46%	39%	48.27%	37.5%
Smallpox	35%	51%	46%	49%	50.8%

* Diphtheria, tetanus, whooping cough and poliomyelitis.

117. The national AIDS prevalence rate, evaluated in 1992 and 1994, is approximately 3 per cent (but over 5 per cent in the south).

118. The contraceptive prevalence rate for modern methods is 6.6 per cent for women.

119. As part of efforts to combat iodine deficiency disorders, national legislation on the iodization of salt includes Interministerial Decree No. 0330/MSSPA/MIAJ/MMEH/MFC of 16 February 1995 on measures relating to the production, import and marketing of iodized salt for the prevention of iodine deficiency disorders. A "Wassa" iodized salt production unit has been in operation in Bamako since 1995.

120. Concerning nutrition, activities are being carried out to promote the production of vitamin-rich foods to forestall the harmful consequences of vitamin A deficiency and malnutrition in general among vulnerable groups:

8 per cent of newborns have a birth weight of under 2.5 kilograms;

13.03 per cent of children examined in health centres were given vitamin A;

9.88 per cent of children examined in health centres suffer from malnutrition.

121. A programme for encouraging maternal breastfeeding and the supplementary feeding of young children is under way. One of its priority goals is to encourage maternal breastfeeding exclusively through 4 to 6 months and the

construction of hospitals and maternity wings in "baby-friendly" hospitals. Seventy-seven per cent of the children examined in health centres were being breastfed.

122. In the area of oral rehydration therapy:

5.87 per cent of children treated for diarrhoea received oral rehydration solution (ORS) at home;

39.95 per cent of children treated for diarrhoea have received ORS.

123. The main childhood diseases encountered are malaria (30.48 per cent of cases), acute respiratory infections (18.92 per cent of cases) and diarrhoea (13.64 per cent of cases).

124. Maternal deaths affect children's quality of life; the causes of maternal deaths are haemorrhage, obstructed labour and infections. Of 100 women who give birth in a health centre, two die during the birth; of 100 women having given birth, 16 die after the birth.

125. The share of the national budget allocated to health has been increasing.

Table 3

Health budget-State budget ratio (1990-1996)
(in CFA francs)

Year	State budget	Health budget	% (percentage)	Health ratio
1990	225 021 443	10 652 806	4.70	4.18
1991	230 795 000	11 071 181	4.80	4.80
1992	217 147 699	11 474 613	5.28	5.28
1993	200 474 564	9 649 677	4.80	6.80
1994	371 674 56	17 423 072	4.69	7.80
1995	353 960 000	25 683 090	7.25	8.01
1996	380 325 000	31 352 837	8.01	8.33

Table 4

Comparison of ratios with WHO standards

Categories	WHO standards (inhabitants)	Ratios for Mali in 1996 (inhabitants)
1 doctor per	10 000	15 919
1 midwife per	5 000	22 327
1 State-trained nurse per	5 000	10 402
1 public health nurse per	5 000	9 087
1 community development technician per	5 000	73 170

126. An analysis of the health situation indicates that, despite the intensive efforts that are being made, certain deficiencies still need to be resolved. These problems include the following:

(a) The number of health workers is insufficient to meet the population's needs;

(b) Coverage rates for the following three major activities are low: vaccinations, vitamin A therapy and oral rehydration solution (ORS);

(c) There is a large number of maternal deaths and malnutrition and childhood disease rates are high.

127. The efforts to be undertaken for improving the health situation include the following:

(a) Increasing coverage through the establishment of community health centres and revitalized district health centres;

(b) Strengthening of information, education and communication (IEC) activities for health problems;

(c) Social mobilization focusing on health programmes;

(d) Implementing a perinatal care programme; and

(e) Strengthening the capacity of health workers to handle the cases of children and mothers.

Table 5

State-financed social and health-care infrastructures (1992-1996)

Infrastructures	Number
National hospitals	3
Regional hospitals	6
Secondary hospitals	4
Sector/commune health centres	55
District health centres	285
Community health centres (CHCs) and revitalized district health centres (RDHCs)	144
Specialized centres	1
Specialized subregional hospitals	2

128. Mention should be made of Mali's active international cooperation in the health field with partners such as the World Bank, United Nations bodies (WHO, UNICEF, UNDP), bilateral cooperation agencies and NGOs.

D. Social security and child-care services and facilities (art. 26 and art. 18, para. 3)

129. Although the Constitution of Mali recognizes the right of everyone to social welfare, the existing structures and mechanisms have a limited impact as they are reserved for a very small percentage of the population, i.e. wage-earners. These are the National Social Welfare Institute (NSWI) and the Mali Pensioners' Fund (MFP). Besides covering the costs of prenatal care, these funds pay out family benefits.

130. The overwhelming majority (80 to 90 per cent) of the population therefore does not have access to an appropriate social welfare system. There is also no system of generalized social security in Mali. Because of this situation, there are no specific measures to help disabled children, such as special allowances or systematic access to care, special education and other basic services.

131. In addition to the specialized institutions mentioned above, Mali has a network of kindergartens and day-care centres. The capacity of these facilities is insufficient, however, and they are concentrated in the major urban centres (approximately 1 per cent of children of pre-school age, or 11,833 children, attend such institutions). Bamako has a shelter and placement centre and an SOS children's village, both of which take in abandoned children and hardship cases involving children. There are no

shelters specially intended for disabled children, owing to a political position in favour of such cases being handled within the family, whatever the nature of the disability.

132. In view of the foregoing, the Government has introduced a national policy of solidarity aimed primarily at strengthening traditional solidarity networks and creating and developing modern mutual support networks. Plans are also under way to extend social welfare schemes to include self-employed earners and rural workers.

E. Standard of living (art. 27, paras. 1 to 3)

133. Because of the widespread poverty in the country, the situation of children is difficult. According to the 1993 "consumption budget" survey, the poor account for 72 per cent of the general population and 90 per cent in rural areas. The State, through its social services network, assists disadvantaged families in meeting the costs of their children's hospitalization, school enrolment and rehabilitation. The reimbursement of such costs is not systematic, however, and is limited by the State's financial situation.

134. For this reason, the State encourages the establishment of associations that will promote income-generating activities for destitute families and is currently preparing provisions for the implementation of an anti-poverty programme. A few pilot projects, supported by development partners such as UNICEF (development of basic social services in urban areas), appear to be yielding some very encouraging results.

VIII. EDUCATION, LEISURE AND CULTURAL ACTIVITIES

A. Education, including vocational training and guidance (art. 28)

135. The education sector in Mali is run by two departments, the Ministry of Basic Education, which is responsible for pre-school and special education, primary education and functional literacy, and the Ministry of Secondary and Higher Education and Scientific Research.

136. The importance attached to this sector, which alone accounted for 22 per cent of the national budget in 1994, can be explained by two features of Mali's population, its extreme youth, with 48 per cent under 15 years of age (1987), and its high illiteracy rate (77.13 per cent), the literacy rate being 22.87 per cent. Children from 0 to 6 years account for nearly 25 per cent of the total population. School-age children account for 30 per cent.

137. The current system is the result of the colonial educational system and a process of development that began with the 1962 reform. Despite the efforts Mali has made, school enrolment remains low: 39.1 per cent at the primary level and 1.21 per cent at the pre-school level. There are seven special education institutions throughout the territory of Mali (the list of institutions is provided in paragraph 112 above).

138. The table below indicates the distribution of pupils per sector:

Table 6

Pupils enrolled in basic education

Sector	Pupils	Enrolment rate		
		Boys	Girls	General
Pre-school education (1994-1995)	11 908	8 298	7 010	1.21%
Special education (1994-1995)	489	Not available	Not available	Not available
Primary education (1995)	628 187	46.90%	31.3%	39.10%

Source: DNPS.

Source: CPS/MEB Statistical Yearbook 1994-1995.

According to the crude primary school enrolment rate, girls are under-enrolled in comparison with boys. The average school enrolment rate for girls is 25.7 per cent, as opposed to 44.47 per cent for boys. One of the major obstacles to raising the school enrolment rate is the insufficient number of facilities, thus the low capacity of existing classrooms. As a result, many school-age children are not enrolled for lack of places.

139. The main policy questions regarding education for all are developed through consultations between the central Government and the Ministry of Basic Education and other governmental structures, United Nations bodies (UNICEF, UNESCO and UNDP), international financial institutions (World Bank, IMF, ADB, ADF), international, national and local NGOs and other scientific and financial partners, such as USAID, CIDA, etc. All of these structures and bodies work with the Ministry of Basic Education to seek and implement solutions for increasing the capacity and quality of the nation's teaching facilities.

140. In certain areas, school canteens, whose role in improving school attendance had been crucial, are no longer operating due to lack of resources.

141. The following are the basic objectives of educational policy in Mali today:

(a) To expand the system as much as possible by encouraging demand for education and increasing supply, through joint efforts by the different partners, i.e. the Government, operational, technical and financial partners and communities (cf. Decree governing Community Schools);

(b) To improve the quality of education through programmes focusing on staff quality, teaching materials, in-house performance, introduction of national languages and ruralization.

142. As in the other Sahel countries, school enrolment among girls is a serious problem in Mali. Despite their higher numbers among the school-age population, the Constitution, which establishes the right to education, and Decree No. 314 on compulsory schooling for all Malian children, very few girls attend school (see table 6 and para. 137 above). The causes of this situation are:

(a) Socio-cultural (early marriage, gap between the values taught in school and those characteristic of the girls' social background);

(b) Socio-economic (direct and indirect costs);

(c) Institutional: insufficiency and poor quality of facilities; lack of adaptation of programmes and schedules to local conditions.

143. In view of this alarming situation, the Government of Mali, in cooperation with USAID, prepared a subprogramme in 1990 on "School Enrolment for Girls"; this project, which was initially planned for four regions (Koulikoro, Ségou, Sikasso and Bamako), was extended to the entire country in January 1995. Its objectives are the following:

(a) To increase the school enrolment rate for girls at the primary level by improving educational quality and curriculum content;

(b) To reduce repeat and drop-out rates among girls;

(c) To increase the number of women teachers at the primary level.

The national, regional and local levels of the project focus their activities on information and awareness-raising through academic competitions, challenging tasks and the preparation and broadcasting of radio and television programmes. A provisional analysis of this project shows an increase in the school enrolment rates for girls in the target zones, in comparison with the areas not covered by the project: 35.5 per cent as against 17.1 per cent.

144. In the international sphere, since the World Declaration on Education for All (Jomtien, 1990) Mali has made an objective analysis of its educational system and prepared a national basic education plan: the New Educational System (NES). The New Educational System project in Mali aims at making the Malian school system a forum for preparing the patriotic citizens of the future and the builders of a democratic society who will be deeply attached to their own culture and open to other cultures, able to combine popular knowledge with the knowledge and skills acquired through modern scientific and technological advances, and independent and responsible citizens who are creative and capable of initiative.

145. The NES is a tool of the basic education system and the foundation of the entire Malian educational structure. It draws on the demographic, economic, socio-cultural and linguistic features of the country and meets the

crucial development needs of all socio-economic strata by providing everyone with the conditions needed for professional performance and individual and group development. It is designed to achieve the following four basic objectives: (a) coordination: a better basic education system; (b) equity: education for all; (c) continuity: a solid basis for sustained efforts and (d) performance: a school system that is adapted to, and can transform, the real world.

146. The aim of the NES is thus to provide an effective solution to all of the problems identified. It is based on three essential principles:

(a) Cultural identity: rooted in the values of the Malian and African civilization while remaining open to universal civilizations. The NES will make it possible to build, structure and strengthen the distinctive identity of the new citizen by combining the use of national languages and French and/or Arabic with active teaching methods;

(b) Linking the school to real life: one of the objectives of the NES is to diversify the terms of completion of primary education in order to adapt them to the needs of socio-economic and social development. The NES is a school system in the service of development where citizens acquire the knowledge and skills needed to master their environment and make efficient use of resources;

(c) Involving all actors in school life: using a dynamic, partnership-based approach, the NES fully involves the various actors in the management of schools. The democratization of the school system, its relations with others and its administration and teaching methods are a key element of NES philosophy.

147. Generally speaking, the NES requires a shifting of the secondary and higher education budgets towards primary education. To that end, the Government's new decisions on the criteria for the awarding of fellowships are a promising development. By giving a maximum number of school-age children the opportunity and means to attend school and achieve full literacy, the NES provides a permanent solution to illiteracy. Because it focuses its efforts on the majority, it is an appropriate response to the current inequalities and distortions of the Malian educational system.

148. The New Educational System takes an innovative approach to strategy development; its methods are the following:

(a) Functional multilingualism based on the combined use of the mother tongue and the second tongue, imbuing education with our cultural values by validating our national languages while remaining fully open to the outside world through the use of transnational, universally understood languages;

(b) Standardization and integration of the different subsystems of the basic education infrastructure to include literacy training, age-diverse target groups, private and specialized schools, and ultimately eliminating the dichotomy between formal and non-formal education;

(c) An effective synthesis of methods successfully tested in the field, the NES teaching philosophy being one of applying converging methodologies to the academic syllabus;

(d) Concrete prospects on leaving school; for the first time, with the establishment of a "development actors" career path, pupils who have received instruction in the basic education system can participate fully in the country's development as soon as they have completed the sixth form;

(e) A school system that is the concern of everyone: grass-roots contributions, whether from parents' associations, communes and their elected officials or village and religious associations, will be key elements. The active involvement of parents in school life and the NES's modular approach to teaching will usher in a partnership between the school and the environment: participation by pupils in local activities and by local human resources as school instructors.

149. With assistance from the Primary Education Support Fund (PESF), investments by the Government of Mali and its external financial partners in the field of basic education for 1993 to 1995 made it possible to build and equip 880 classrooms, renovate 1,733 classrooms and equip 1,847 classrooms. Investments were also made in the area of teacher recruitment and training and the design and production of teaching materials. It should be noted that the Government of Mali allocates 20 per cent of its annual budget to education.

150. The tables below provide a general idea of the progress achieved in the area of education for all since the Jomtien Declaration. It is worth noting that, as part of Education Project IV and the UNESCO-UNICEF project entitled "Continued follow-up of education for all", achievement tests were administered to pupils in 1992 and 1993, with the 1992 tests covering 110 schools. For the entire country (urban and rural schools), more than 3,000 second- and fifth-form pupils took achievement tests in French and mathematics.

Table 7

Comparison of French achievement test results of pupils in the second year of primary school (1992 and 1993)

Area of skill	1992	1993
Visual-visual	67%	71.5%
Audio-visual	60%	61.3%
Visual-semantic	13%	37.6%
Audio-visual-semantic-graphic	-	20.5%
Visual-graphic	93%	96.6%
Words-phrases	75%	86%
Audio-graphic	8%	48.6%

The figures clearly indicate that results in all categories were considerably better in 1993 than in 1992. This improvement is the result of increased use by teachers of the teaching materials distributed by Education Project IV, largely financed by USAID, and of an improvement in teachers' skills owing to the training received.

Table 8

Comparison of French achievement test results of pupils in the fifth year of primary school (1992 and 1993)

Area of skill	1992	1993
Grammar and terminology	52.16%	57.2%
Vocabulary	42.5%	54%
Reading comprehension		
Narrative text	20%	52%
Functional text	40%	47%
Grammar and spelling	-	45.5%
Conjugations	-	28%

Although results for 1993 were still modest, it should be noted that they were better than the 1992 results in all areas measured.

Table 9

Comparison of mathematics achievement test results of pupils in the second year of primary school (1992 and 1993)

Area of skill	1992	1993
Arithmetic	35.6%	61.5%
Geometric forms	63%	56%
Metric system	47%	52%
Simple problems	46.6%	32.3%
Classification and seriation	61.6%	65%
Identification of tens and units	-	49%

For mathematical concepts, the results achieved between 1992 and 1993 can be regarded as mixed. Considerable efforts are under way, however, to improve the pupils' performance in mathematics significantly.

Table 10

Comparison of mathematics achievement test results of pupils in the fifth year of primary school (1992 and 1993)

Area of skill	1992	1993
Arithmetic	48.3%	54.5%
Seriation and classification	26%	41.5%
Simple problems	47.8%	33.5%
Metric system	23%	35.5%
Geometric figures	47.8%	39.5%
Complex numbers	-	39.5%
Division	-	32%
Terminology concepts	-	34%

The observations made about the second-form pupils are equally valid for the fifth form, for which aggregated results for 1992 and 1993 are also available.

151. The results of the tests administered in 1994, to be published in the final report that is currently being prepared, generally indicate that the 1994 group of pupils performed better in mathematics than the pupils of the two preceding years.

152. In the area of teacher training a training centre was set up at the National Teacher-Training Institute in the framework of Education Project IV, which is aimed at quality education for all; it has trained all school principals and the majority of teachers in operational pedagogical objectives (OPO) and the use of teaching materials. Most of the schools have teaching manuals, which are used by the teachers in class. Teachers are increasingly well supervised by inspectors. The Primary Education Support Fund (PESF) has led to an increase in requests by communities and greater efforts to meet them.

153. After a difficult beginning, structures to promote the enrolment of girls at all levels of the educational system were finally introduced. An educational data management system is now in operation and provides exhaustive and reliable data on the performance of the Malian educational system.

154. The following problems have undermined the effectiveness of the strategy, plan and programmes of the Education for All scheme:

(a) The impact of the democratic revolution of 26 March 1991 on the country's economic, political and social fabric;

(b) The structural adjustment programme;

(c) The devaluation of the CFA franc;

(d) Special-interest demands by organizations, trade unions and demographic associations;

(e) The shortage of human, material and financial resources;

(f) The crises in schools and universities;

(g) The people's reluctance towards the project on the remodelling of the educational system;

(h) The preparation of a plan for raising public awareness.

B. Aims of education (art. 29)

155. The education dispensed by the school system aims at:

(a) Promoting the full development of the child;

(b) Helping the child move smoothly through the different stages of life;

(c) Preparing the child for adult life;

(d) Enabling the child to learn skills in different fields (education, culture, sport, employment, etc.).

156. Strategies involve:

(a) Decentralizing the basic education system;

(b) Developing a pre-school educational system imbude with our values and traditions and strengthening the policy of integrating disabled children into the school system;

(c) Restructuring primary education by increasing the number of career paths, especially for vocational training at the end of the primary level;

(d) Strengthening the use of national languages in teaching;

(e) Establishing education centres for development (ECDs) throughout the territory and strengthening literacy campaigns;

(f) Preparing and implementing a policy of initial training and continuing education for teaching staff;

(g) Promoting the production of textbooks;

(h) Establishing a partnership system in schools.

157. Specific actions undertaken include:

(a) The establishment of the Primary Education Support Fund (PESF), through which 880 classrooms were built and 1,733 classrooms renovated between 1989 and 1994;

(b) The equipping of 1,847 classrooms;

(c) The establishment in 1992 of a national office to promote the enrolment of girls in school;

(d) As part of an effort to improve school enrolment rates, the "Basic Education" Focal Group (consisting of 90 NGOs) has already begun activities aimed at establishing 150 schools in the regions of Kayes, Mopti and Gao (at a cost of 800 million CFA francs).

C. Leisure, recreation and cultural activities (art. 31)

158. Due attention is paid to this aspect by the actors involved, i.e. the Ministries of Health, Solidarity and Elderly Persons, Basic Education, Culture and Communication and Youth and Sports, as well as community associations and NGOs.

159. The principal activities conducted in this area are:

(a) The organization of annual holiday camps both in Mali and abroad, by the Government's technical services and by associations and NGOs. Such camps give the children an opportunity to organize sketches and athletic activities;

(b) The establishment of associations such as the National Scout Movement and the Mali Pioneers' Association;

(c) The establishment of day leisure centres;

(d) The organization of guided visits for children;

(e) The establishment of libraries as part of a public reading campaign in the country;

(f) The establishment of six reading and activities centres for children in Bamako, attended by 612 children from 3 to 12 years of age;

(g) A children's library in Bamako;

(h) The organization of sports and cultural competitions;

(i) The introduction of end-of-year prizes and celebrations;

(j) The training of vacation and recreational centre staff;

(k) The preparation of regulations governing vacation and recreational centres (operation; health and medical requirements).

160. The insufficient resources allocated to the Department of Youth and Sports have, however, obviously curbed these activities.

IX. SPECIAL PROTECTION MEASURES

A. Children in situations of emergency

1. Refugee children

161. In the spirit of the Convention relating to the Status of Refugees and the OAU Convention Governing the Specific Aspects of Refugee Problems in Africa, the Government of Mali has always granted refugees, especially refugee children, administrative and legal facilities. Current data do not indicate the specific percentage of refugee children, but figures on children and women are available. According to the UNHCR branch office in Mali, women and children accounted for 70 per cent of the entire refugee population in 1995. There is a minority of refugees from Liberia, Rwanda, Sierra Leone and Mauritania. Urban refugees (capital and surrounding area) number 800 (men, women and children). There are 15,300 Mauritanian refugees, who are located in Kayes (first region of Mali). Mali receives support from UNHCR, national and international NGOs and other international organizations in hosting, accommodating and caring for refugees.

162. There were approximately 100,000 Malian refugees in neighbouring countries in 1993-1994. In 1995, the Government of Mali, host countries and UNHCR began repatriating these refugees.

2. Children in armed conflicts

163. In order to deal with the rebellion in northern Mali, which has unfortunately resulted in many casualties (some of whom were children), a Department for the North was established. A so-called National Pact was signed by the Government and the Azaouad Unified Movements and Fronts in an effort to find a peaceful settlement to the rebellion. The assistance and support measures being planned by the Government apply to all social strata.

B. Children in conflict with the law

1. The administration of juvenile justice

164. Act N. 87-98/ANRM of 9 February 1987 on the criminal responsibility of minors and the establishment of juvenile courts contains detailed rules governing the administration of criminal justice for minors, who are divided into two categories: (a) minors under 13 years of age, whom the law regards as having no criminal responsibility whatever; and (b) minors from 13 to 18 years of age, who may be regarded as criminally responsible if the court finds that they have understood the consequences of their acts.

2. Treatment of children deprived of their liberty

165. Treatment is based on the principle of separating minor prisoners from adult prisoners. Minors must be held in a rehabilitation institution or, if

none is available, in a special area reserved for minors in the prison. The insufficiency of structures and lack of means make it difficult to observe these legal provisions strictly.

3. The sentencing of juveniles

166. Pursuant to the principle that they lack criminal responsibility, minors under 13 years of age may not be sentenced. Minors from 13 to 18 years of age serve only part of the sentence applicable to adults.

4. Physical and psychological rehabilitation and social reintegration

167. Institutions for physical rehabilitation and social reintegration are not intended only for children who are victims of negligence, exploitation and ill-treatment or other forms of cruel or inhuman treatment. It should be noted in this connection that there are few instances of ill-treatment or torture of children because children are considered to be sacred. If such situations were exceptionally to arise, the provisions of the Penal Code would apply. The provisions of the Family Relations Code (Ordinance No. 36/CMLN of 31 July 1973) establish penalties in cases of ill-treatment. Act No. 66-21 ANRM of 13 July 1966 provides for penalties against "parents or guardians observed to be inadequate or seriously negligent in caring for children". In some cases, the State may intervene and take appropriate educational and assistance measures. The Bollé Observation and Rehabilitation Centre is the State agency in charge of the reintegration of juvenile offenders. The Family Placement and Reception Centre deals with abandoned children and hardship cases.

C. Children in situations of exploitation

1. Economic exploitation

168. National legislation includes article L.187 of the Labour Code, which stipulates the following: "Children cannot be employed in any enterprise, even as apprentices, before the age of 14, except under a written derogation issued by the Ministry of Labour on the basis of the local circumstances and the tasks which they might be asked to perform". This article would be in conformity with article 32 of the Convention on the Rights of the Child if it included regulations governing work schedules and penalties. It is worth noting that efforts are being made by both State and community bodies to organize the informal sector, in which many children and young people work.

169. Examples of such bodies are young workers' associations and economic interest groups. These associations and groups are supervised by NGOs and associations with skills and experience in the area of training. Children and young people are not only given vocational guidance through workshops and training centres (carpentry, mechanics, dressmaking, dyeing, etc.), but are also organized into associations in order better to defend their interests and stand up to market competition. An example is the cooperation between the Ministry of Youth with Jeunesse Action ENDA Tiers-Monde under the "Carrefour des Jeunes" programme, which consists of training workshops in metal-working, wood-working and shoe-repairing. In cooperation with certain NGOs and

associations, the Ministry of Health, Solidarity and Elderly Persons and the Ministry of Justice have conducted training programmes for girls and single mothers without jobs.

2. Drug abuse

170. The purchase, consumption, possession and sale of drugs are subject to severe penalties under Act No. 83-14/ANRM of 1 September 1983 concerning penalties relating to use of drugs and poisonous substances.

171. The Government of Mali has taken a number of steps in response to the increase in the use of and traffic in drugs:

(a) Organization of media campaigns to raise awareness of the dangers of drug use;

(b) Revision of the law to make it more effective;

(c) Revitalization of the inter-ministerial commission to combat drug use;

(d) Introduction of multisectoral anti-drug programmes.

3. Sexual exploitation and sexual abuse

172. Articles 19 and 34 of the Convention on the Rights of the Child stipulate that children shall be protected from all forms of sexual exploitation and sexual abuse. Article 183 of the Malian Penal Code also characterizes sexual exploitation and sexual abuse as offences and lays down punishment for them. Mention should also be made of the social disapproval of persons responsible for such offences, which may go as far as exclusion (from their family, religion, associations of which they are members of other walks of life), especially in cases of incest. Although such exploitation and abuse is not frequent, it does exist and those responsible often go unpunished because they are rarely reported to the competent authorities.

4. Other forms of exploitation

173. In addition to the known forms of economic exploitation, the deterioration of the social fabric has given rise to new forms of exploitation which may become serious societal problems if steps are not taken. This situation can already be perceived the urban centres like Bamako and Mopti.

174. A survey conducted in Bamako in September 1993 indicated that there were four main groups of street children:

(a) Street children who work and are either earning money to help support their families or serving apprenticeships;

(b) Street children who work and are fully independent;

(c) Street children who wander throughout the city and generally have little family or material support. These are the "Garibus" or "talibes", who beg to fill their marabout's "pockets";

(d) Street babies, from 6 to 24 months of age, whom their parents use to earn money by taking advantage of a local tradition.

In all these cases, there are people who exploit these children. This situation inevitably leads these children to break with their families and take to the street.

175. Since 1990, however, the authorities and other social partners have been paying special attention to this problem. From 1992 to 1995, several programmes and projects were designed and implemented, including the following: Urban Development Programme and Assistance Project for Children in Difficult Circumstances, financed by UNICEF in Bamako and Mopti; CARITAS-Mali's "Street Children" project in Bamako; Fondation pour l'Enfance "Street Children" project in Mopti; Action Mopti's "Street Children" project in Mopti; ENDA-Tiers-Monde's "Street Children" project in Bamako; Terre de Vie's "Children in Conflict with Society" project in Bamako; and the Association d'aide et solidarité enfance-Mali's support project for the social reintegration of street babies in Bamako.

5. Sale, trafficking and abduction of children

176. Article 35 of the Convention on the Rights of the Child invites States parties to take all appropriate national, bilateral and multilateral measures to prevent the abduction of, the sale of or the traffic in children for any purpose or in any form. Articles 189 and 190 of the Malian Penal Code establish penalties for the abduction, trafficking or sale of children. Those responsible for such offences are subjected to criminal penalties.

D. Children belonging to a minority or an indigenous group

177. Mali is a country with both ethnic and cultural diversity and a deep secular unity. There are no minorities or indigenous groups as such. Over time, the different ethnic groups have forged a solid unity and intermingled successfully.

CONCLUSION

178. As this initial report has shown, since Mali's ratification of the Convention on the Rights of the Child in August 1990, the Government of Mali has made serious efforts to implement a policy for the promotion and protection of children. This situation and the political situation, which is one of emerging republican institutions and a democratic environment where adults and children in particular are being placed at the centre of development, will certainly contribute to the gradual achievement of the Convention's objectives. The consolidation of these democratic achievements should provide an incentive for further expression of the authorities' political will and a guarantee of success.

179. In the legal sphere, the plans under way to prepare a set of codes (codes on the welfare and protection of children) are additional guarantees of the welfare and development of Malian children. In the social sphere, the implementation of the National Plan of Action for the Survival, Development and Protection of Children should lead to the gradual improvement of the situation of children.

180. Deficiencies persist, however, and need to be corrected; steps must also be taken to adapt the situation of children to socio-economic development in Mali. Satisfactory results will not be achieved until the State, NGOs, development partners and society at large cooperate actively in implementing the Convention and pool their resources and energies to conduct harmonious development programmes.